#### Case 23-20213-JAD Doc 27 Filed 02/07/23 Entered 02/07/23 13:04:26 Desc Main Document Page 1 of 52

		<b>2</b> 000111	one : age = 0.0=	
Fill in this info	rmation to identify you	r case:		
Debtor 1	Michael J. Oslac	ky		
	First Name	Middle Name	Last Name	
Debtor 2	Joyce L Oslacky	1		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA	
Case number	23-20213			Charle if this
(II KIIOWII)				☐ Check if this amended filir

### Official Form 106Sum

Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

page 1 of 2

info	as complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	125,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	33,263.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	158,263.00
Par	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	130,125.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	70,385.59
	Your total liabilities	\$	200,510.59
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,474.09
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,725.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other scl	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and s	ubmit this form to

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Michael J. Oslacky
Debtor 2 Joyce L Oslacky

Case number (if known) 23-20213

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_5,845.39

One Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	<b>Total claim</b>	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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		Document	Page 3 of 52		
Fill in this info	rmation to identify your case and t	his filing:			
Debtor 1	Michael J. Oslacky				
200.0.		e Name	Last Name		
Debtor 2	Joyce L Oslacky				
(Spouse, if filing)	First Name Middl	e Name	Last Name		
United States B	Bankruptcy Court for the: WESTER	N DISTRICT OF PEN	NNSYLVANIA		
Case number	23-20213				□ Object (Cities to ex-
Case Humber	23-20213				☐ Check if this is an amended filing
					ŭ
o	4004/5				
Official Fo	orm 106A/B				
Schedu	le A/B: Property				12/15
	separately list and describe items. List	an asset only once. I	f an asset fits in more than one	category, list the asset in	the category where you
	e Each Residence, Building, Land, or O				
☐ No. Go to P	art 2.				
Ves Where	e is the property?				
Too. Whole	to the property.				
1.1		What is the prope	rty? Check all that apply		
517 High	lland Avenue N	■ Single-famil		Do not deduct secured cla	aims or exemptions. Put
Street addres	s, if available, or other description	. <b>-</b> ·	nulti-unit building	the amount of any secured claims on Schedule D. Creditors Who Have Claims Secured by Property.	
			ım or cooperative	Creditors who have Clair	пѕ Ѕесигеа ву Ргорепу.
			- d b ii - b		
Oakdala	DA 45074 0000		ed or mobile home	Current value of the	Current value of the
Oakdale	PA 15071-0000  State ZIP Code	Land Investment	n ron orth /	entire property? \$125,000.00	portion you own? \$125.000.00
City	State ZIP Code	☐ Investment☐ Timeshare	property	\$125,000.00	\$125,000.00
		☐ Other		Describe the nature of y (such as fee simple, ten	our ownership interest ancy by the entireties, or
		Who has an intere	est in the property? Check one	a life estate), if known.	<b>c,,</b> c
		Debtor 1 on	ly	Fee simple	
Allegher	ny	Debtor 2 on	ly		
County			d Debtor 2 only	☐ Check if this is com	nmunity property
			of the debtors and another	(see instructions)	,, ,
		Other information property identification	you wish to add about this iter	n, such as local	
		Nesidelice-2 3	Story Viny Siding		
	ollar value of the portion you own for have attached for Part 1. Write that				\$125,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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Debto		oyce L Osla	•		Case number (if known)	23-20213
3. <b>Ca</b>	rs, vans,	trucks, tract	ors, sport utility ve	hicles, motorcycles		
	No					
	Yes					
		N!!			Do not deduct see	cured claims or exemptions. Put
3.1	Make:	Nissan		Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
	Model:	Rogue		Debtor 1 only	Creditors Who Ha	eve Claims Secured by Property.
	Year:	2018	E2 000	Debtor 2 only	Current value of	
		nate mileage:	52,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Otner int	formation:		At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$19,000	9.00 \$19,000.00
3.2	Make:	Hyundai		Who has an interest in the property? Check one		cured claims or exemptions. Put
0.2	Model:	Santa Fee	e Sport	Debtor 1 only	the amount of any	r secured claims on Schedule D: ave Claims Secured by Property.
	Year:	2017		Debtor 2 only		, , ,
		nate mileage:	115,000	☐ Debtor 1 and Debtor 2 only	Current value of entire property?	the Current value of the portion you own?
		formation:		☐ At least one of the debtors and another		, ,
				☐ Check if this is community property (see instructions)	\$7,500	5.00 \$7,500.00
				n for all of your entries from Part 2, includir that number here		\$26,500.00
Part 3	Descri	he Vour Person	nal and Household Ite	ams.		
				terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E>	<i>amples:</i> No	,	urnishings ces, furniture, linens	, china, kitchenware		
	Yes. De	scribe				
				ptop, Record Player and & Household Goods		\$1,000.00
	•	Televisions ar		eo, stereo, and digital equipment; computers, p nedia players, games	orinters, scanners; music c	collections; electronic devices
_	No	scribe	,			
	camples:		figurines; paintings, ons, memorabilia, co	prints, or other artwork; books, pictures, or other	er art objects; stamp, coin	, or baseball card collections;
	No					
	Yes. De	scribe				

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Michael J. Oslacky

	ebtor 1 ebtor 2	Michael J. O Joyce L Osla	•			Case number (if known)	23-20213	
9.	Example No	ent for sports ares: Sports, photo musical instru	graphic, exercise, ar	nd other hobby equipmen	nt; bicycles, pool tables,	golf clubs, skis; canoes	and kayaks; carpentry	tools;
10.	■ No		s, shotguns, ammuni	ition, and related equipme	ent			
11.	□ No		othes, furs, leather c	oats, designer wear, shoe	es, accessories			
			Misc. Men's Clo	othing				\$600.00
			Misc. Women's	Clothing				\$800.00
12.	□ No		welry, costume jewel  Diamond Wedd	lry, engagement rings, we	edding rings, heirloom je	ewelry, watches, gems, o		\$400.00
13.	<i>Examp</i> □ No	rm animals les: Dogs, cats, Describe	birds, horses					
			3 Cats					\$3.00
14.	■ No	ner personal an		you did not already list	, including any health	aids you did not list		
15				s from Part 3, including		you have attached	\$2,80	3.00
		scribe Your Finan 'n or have any l		iterest in any of the follo	owing?		Current value of portion you own Do not deduct so claims or exempt	n? ecured
16.	□ No		-	n your home, in a safe de		when you file your petiti	on	
						Cash		\$50.00

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Debtor 1 Michael J. Oslacky

Debtor 2 Joyce L Oslacky		Joyce L Osla	Joyce L Oslacky		Case number (if known) 23-20213		
					Cash	\$10.00	
	Examp _			ecounts; certificates of deposit; some same institution, list	shares in credit unions, brokerage house each.	es, and other similar	
_	I No I Yes			Institution name:			
			17.1. Checking	PNC Bank		\$200.00	
ı	Examp  No		or publicly traded stocks investment accounts with b Institution or issue	orokerage firms, money market er name:	accounts		
19.		blicly traded sto	ock and interests in incor	porated and unincorporated	businesses, including an interest in a	ın LLC, partnership, and	
		Give specific info	ormation about them Name of entity:		% of ownership:		
•	Negotia Non-ne ■ No	able instruments egotiable instrum	include personal checks, c	gotiable and non-negotiable i ashiers' checks, promissory no transfer to someone by signing	tes, and money orders.		
	<i>Examp</i> ☑ No -	nent or pension les: Interests in I	RA, ERISA, Keogh, 401(k).	, 403(b), thrift savings accounts  Institution name:	s, or other pension or profit-sharing plans	S	
			401(k)	Principal		\$2,500.00	
	Your sh <i>Examp</i> ■ No		d deposits you have made	so that you may continue servic tt, public utilities (electric, gas, v Institution name or inc	water), telecommunications companies,	or others	
	_	es (A contract fo	r a periodic payment of mo	ney to you, either for life or for	a number of years)		
	■ No I Yes	lss	suer name and description.				
2		C. §§ 530(b)(1), 5	529A(b), and 529(b)(1).		under a qualified state tuition program of any interests.11 U.S.C. § 521(c):	n.	
	No	•	ture interests in property	(other than anything listed in	line 1), and rights or powers exercisa	able for your benefit	
	Patents	s, copyrights, tra	ademarks, trade secrets,	and other intellectual propert eeds from royalties and licensin			

Official Form 106A/B Schedule A/B: Property page 4

No

Case 23-20213-JAD Doc 27 Filed 02/07/23 Entered 02/07/23 13:04:26 Page 7 of 52 Document Debtor 1 Michael J. Oslacky Debtor 2 Case number (if known) 23-20213 Joyce L Oslacky ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2022 \$1,000.00 **Federal** 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: \$50,000 Life Insurance/Allstate \$200.00 Joyce Oslaky (whole-life) \$50,000 Life Insurance/Allstate **Michael Oslacky** \$0.00 (term) 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information..

#### 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No

☐ Yes. Describe each claim.......

#### 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No

☐ Yes. Describe each claim.......

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Debtor 1 Debtor 2	Michael J. Oslacky Joyce L Oslacky		Case number (if known)	23-20213
35. <b>Any f</b>	inancial assets you did not already list			
■ No				
☐ Yes	s. Give specific information			
	I the dollar value of all of your entries from Part 4, includir Part 4. Write that number here			\$3,960.00
Part 5:	Describe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	ate in Part 1.	
37. <b>Do yo</b> u	u own or have any legal or equitable interest in any business-relat	ed property?		
No. 0	Go to Part 6.			
☐ Yes.	Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Related Property You you own or have an interest in farmland, list it in Part 1.	ı Own or Have an Interes	st in.	
46. <b>Do</b> yo	ou own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
■ No	o. Go to Part 7.			
□ Ye	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
	ou have other property of any kind you did not already list	?		
	mples: Season tickets, country club membership			
■ No				
⊔ Yes	s. Give specific information			
54. <b>Add</b>	I the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>Par</b> t	t 1: Total real estate, line 2			\$125,000.00
56. <b>Par</b>	t 2: Total vehicles, line 5	\$26,500.00		· ,
57. <b>Par</b>	t 3: Total personal and household items, line 15	\$2,803.00		
	t 4: Total financial assets, line 36	\$3,960.00		
59. <b>Par</b>	t 5: Total business-related property, line 45	\$0.00		
	t 6: Total farm- and fishing-related property, line 52	\$0.00		
	t 7: Total other property not listed, line 54 +	\$0.00		
62. <b>Tota</b>	al personal property. Add lines 56 through 61	\$33,263.00	Copy personal property to	stal \$33,263.00
63. <b>Tot</b> a	al of all property on Schedule A/B. Add line 55 + line 62			\$158,263,00

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this info	rmation to identify your	case:		
Debtor 1	Michael J. Oslack	ку		
	First Name	Middle Name	Last Name	
Debtor 2	Joyce L Oslacky			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	WESTERN DISTRICT (	OF PENNSYLVANIA	
Case number	23-20213			
(if known)				☐ Check if this is an amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.				
	517 Highland Avenue N Oakdale, PA 15071 Allegheny County	\$125,000.00		\$15,000.00	11 U.S.C. § 522(d)(1)			
	Residence-2 Story Viny Siding Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit				
	2018 Nissan Rogue 52,000 miles	\$19,000.00		\$5,545.00	11 U.S.C. § 522(d)(2)			
	Zine nom estisada 702.			100% of fair market value, up to any applicable statutory limit				
	2017 Hyundai Santa Fee Sport 115,000 miles	\$7,500.00		\$830.00	11 U.S.C. § 522(d)(5)			
	Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit				
	TV, Blueray, Laptop, Record Player and	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)			
	Misc. Furniture & Household Goods Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit				
	Misc. Men's Clothing Line from Schedule A/B: 11.1	\$600.00		\$600.00	11 U.S.C. § 522(d)(3)			
	Line from Gorieuale AVD. 11.1			100% of fair market value, up to any applicable statutory limit				

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Debtor 2				Case number (if known)	23-20213
	ef description of the property and line on needule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	sc. Women's Clothing e from Schedule A/B: 11.2	\$800.00	•	\$800.00	11 U.S.C. § 522(d)(3)
				100% of fair market value, up to any applicable statutory limit	
	amond Wedding Ring e from Schedule A/B: 12.1	\$400.00		\$400.00	11 U.S.C. § 522(d)(4)
				100% of fair market value, up to any applicable statutory limit	
	Cats e from Schedule A/B: 13.1	\$3.00		\$3.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
Ca Lin	sh e from Schedule A/B: 16.1	\$50.00		\$50.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
<b>Ca</b> Line	sh e from Schedule A/B: 16.2	\$10.00		\$10.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	ecking: PNC Bank e from Schedule A/B: 17.1	\$200.00		\$200.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	1(k): Principal e from Schedule A/B: 21.1	\$2,500.00		\$2,500.00	11 U.S.C. § 522(d)(12)
				100% of fair market value, up to any applicable statutory limit	
	deral: 2022 e from Schedule A/B: 28.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	e you claiming a homestead exemption			led on or after the date of adjustmen	t.)
	No				
	Yes. Did you acquire the property cover	red by the exemption wi	thin 1	,215 days before you filed this case?	•
	□ No				
	☐ Yes				

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0.00 10 1011		Docume	nt Page 11	of 52		
Fill in this information to ide	ntify your ca	ase:				
Debtor 1 Michael	J. Oslacky					
First Name	<u>,                                      </u>	Middle Name	Last Name			
Debtor 2 <b>Joyce L</b>	Oslacky					
(Spouse if, filing) First Name		Middle Name	Last Name			
United States Bankruptcy Cou	rt for the:	WESTERN DISTRICT	OF PENNSYLVANIA			
Case number <b>23-20213</b>						
(if known)						if this is an led filing
000 1 15 1005						3
Official Form 106D						
Schedule D: Cred	litors W	Vho Have Clai	ims Secured	by Propert	У	12/15
number (if known).  1. Do any creditors have claims s  No. Check this box and			ur other schedules. Yo	u have nothing else t	o report on this form.	
Yes. Fill in all of the info	ormation belo	DW.				
Part 1: List All Secured Cl	laims					
2. List all secured claims. If a cre	ditor has more	e than one secured claim, lis	at the creditor separately	Column A	Column B	Column C
for each claim. If more than one comuch as possible, list the claims in				Amount of claim  Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Ally Financial	De	escribe the property that s	ecures the claim:	\$13,455.00	\$19,000.00	\$0.00
Creditor's Name	20	018 Nissan Rogue		<u> </u>		
P.O. Box 380901		s of the date you file, the c	laim is: Check all that			
Bloomington, MN 55	400	ply.				
Number, Street, City, State & Zip		Contingent Unliquidated				
,		Disputed				
Who owes the debt? Check one		ature of lien. Check all tha	t apply.			
Debtor 1 only		An agreement you made (	such as mortgage or seci	ired		

car loan)

☐ Judgment lien from a lawsuit

Other (including a right to offset)

 $\square$  Statutory lien (such as tax lien, mechanic's lien)

Last 4 digits of account number

**Purchase Money Security** 

2759

 $\square$  Debtor 2 only

■ Debtor 1 and Debtor 2 only

community debt

lacksquare At least one of the debtors and another

Date debt was incurred 5/13/2019

☐ Check if this claim relates to a

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Debtor 1 Michael J. Oslacky		Case number (if known)	23-20213	
First Name Middle N	lame Last Name			
Debtor 2 Joyce L Oslacky First Name Middle N	lame Last Name			
riist Name iviiddie N	danie Last Name			
2.2 Capital One Auto Finance	Describe the property that secures the claim:	\$6,670.00	\$7,500.00	\$0.00
Creditor's Name	2017 Hyundai Santa Fee Sport			
P.O. Box 259407	As of the date you file, the claim is: Check all that			
Plano, TX 75025	apply.  Contingent			
Number, Street, City, State & Zip Code	☐ Contingent☐ Unliquidated			
Number, Street, Ony, State & Zip Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or s	ecured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a		Money Security		
community debt	— Other (morading a right to onset)			
Date debt was incurred 7/12/2018	Last 4 digits of account number 1001			
2.3 Rocket Mortgage	Describe the property that secures the claim:	\$110,000.00	\$125,000.00	\$0.00
Creditor's Name	Residence-2 Story Vinyl Siding; 517			
	Highland Avenue N., Oakdale, PA			
	15071			
1050 Woodward Avenue	As of the date you file, the claim is: Check all that apply.			
Detroit, MI 48226	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or s	ecured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 4/30/2015	Last 4 digits of account number 5371			
Add the dollar value of your entries in C	Column A on this page. Write that number here:	\$130,125	5.00	
If this is the last page of your form, add	the dollar value totals from all pages.	\$130,125	5.00	
Write that number here:				

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		D00	<del>zument Page .</del>	13 01 52	
Fill in this inf	formation to identify your o	case:			
Debtor 1	Michael J. Oslack	v			
	First Name	Middle Name	Last Name		
Debtor 2	Joyce L Oslacky				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	WESTERN DIS	TRICT OF PENNSYLVAN	IIA	
Case number	23-20213				
(if known)					☐ Check if this is an
					amended filing
Official Fo	orm 106E/F				
	E/F: Creditors W	ho Have Ur	secured Claims	}	12/15
Schedule G: Ex Schedule D: Cro left. Attach the name and case	ecutory Contracts and Unexp editors Who Have Claims Sec	red Leases (Officia ured by Property. If e. If you have no in	I Form 106G). Do not include more space is needed, cop	y contracts on Schedule A/B: Property ( le any creditors with partially secured c y the Part you need, fill it out, number t t, do not file that Part. On the top of any	laims that are listed in he entries in the boxes on the
1. Do any cre	editors have priority unsecured	d claims against yo	u?		
■ No. Go	to Part 2.				
☐ Yes.					
Part 2: Lis	t All of Your NONPRIORIT	Y Unsecured Cla	ims		
3. Do any cre	editors have nonpriority unsec	ured claims agains	t you?		
☐ No. You	have nothing to report in this pa	art. Submit this form	to the court with your other so	chedules.	
Yes.					
unsecured	claim, list the creditor separately	for each claim. For	each claim listed, identify wha	ho holds each claim. If a creditor has mo at type of claim it is. Do not list claims alrea an three nonpriority unsecured claims fill o	dy included in Part 1. If more
ruit 2.					Total claim
4.1 <b>Appl</b>	e Card-GS Bank	Las	t 4 digits of account numbe	r 6734	\$1,267.00
•	iority Creditor's Name	Who	en was the debt incurred?	Debt last incurred in 12/202	
	Box 7247	VVII	en was the dept incurred?	Debt last incurred in 12/202	<u></u>
_	man Sachs Bank				
	delphia, PA 19170				
	er Street City State Zip Code ncurred the debt? Check one.	As	of the date you file, the clair	n is: Check all that apply	
	btor 1 only	_			
_	•		Contingent		
	btor 2 only		Jnliquidated		
	btor 1 and Debtor 2 only	_	Disputed	and alaims	
	least one of the debtors and and		e of NONPRIORITY unsecui Student loans	red claim:	
☐ Ch debt	eck if this claim is for a comm	nunity		position agreement or diverse that	l not
	claim subject to offset?		Obligations arising out of a se ort as priority claims	paration agreement or divorce that you did	THOU
■ No			Debts to pension or profit-sha	ring plans, and other similar debts	
☐ Ye			Other. Specify Consume		
<b>—</b> 16	<u>-</u>	- (	Julier. Specify		

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Debtor Debtor	1 Michael J. Oslacky 2 Joyce L Oslacky		Case number (if known) 23-20213	
4.2	Apple Card-GS Bank	Last 4 digits of account number	7104	\$503.00
	Nonpriority Creditor's Name Lockbox 6112 P.O. Box 7247 Goldman Sachs Bank	When was the debt incurred?	Debt last incurred in 12/2022	·
	Philadelphia, PA 19170  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer	Goods	
4.3	Avant/Webbank	Last 4 digits of account number	3243	\$1,100.00
	Nonpriority Creditor's Name 222 N. LaSalle Street Suite 1600 Chicago, IL 60601	When was the debt incurred?	Debt last incurred in 10/2022	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Consumer	Goods	
4.4	Best Egg Nonpriority Creditor's Name	Last 4 digits of account number	xx33	\$408.00
	1523 Concord Pike Suite 201	When was the debt incurred?	Debt last incurred in 2020	
	Wilmington, DE 19803  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify Installment	Account	

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Debtor Debtor	Michael J. Oslacky  Joyce L Oslacky		Case number (if known)	23-20213	
4.5	Capital One	Last 4 digits of account number	5413		\$916.00
	Nonpriority Creditor's Name P.O. Box 31293 Salt Lake City, UT 84131	When was the debt incurred?	Debt last incurred in	8/2022	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce t	hat you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar deb	ts	
	Yes	Other. Specify Consumer	Goods		
4.6	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	0003		\$585.00
	P.O. Box 31293 Salt Lake City, UT 84131	When was the debt incurred?	Debt last incurred in	12/2022	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	hat you did not		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Consumer	Goods		
4.7	Capital One	Last 4 digits of account number	5749		\$302.00
	Nonpriority Creditor's Name P.O. Box 31293 Salt Lake City, UT 84131	When was the debt incurred?	Debt last incurred in	12/2022	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce t	hat you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar deb	its	
	☐ Yes	■ Other. Specify Consumer	Goods		

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Debtor 1 Michael J. Oslacky

Debtor	2 Joyce L Oslacky		Case number (if known)	23-20213	
4.8	Capital One	Last 4 digits of account number	3970		\$3,265.00
	Nonpriority Creditor's Name P.O. Box 31293 Salt Lake City, UT 84131	When was the debt incurred?	Debt last incurred i	in 8/2022	
	Number Street City, 01 04131  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	☐ Yes	Other Specify Consumer	Goods		
4.9	Comenity Bank/Comenity Card	Last 4 digits of account number	5142		\$4,605.00
	Nonpriority Creditor's Name 3075 Loyalty Circle	When was the debt incurred?	Debt last incurred i	in 2021	
	P.O. Box 182789 Columbus, OH 43218				
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.  ☐ Debtor 1 only				
	_	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure			
	At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa			
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharir			
	No	_			
	☐ Yes	■ Other. Specify Consumer	Goods		
4.1 0	Credit One Bank	Last 4 digits of account number	8513		\$942.00
	Nonpriority Creditor's Name 6801 S. Cimarron Road	When was the debt incurred?	Debt last incurred i	in 2021	
	Las Vegas, NV 89113  Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.	,			
	Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	Yes	■ Other. Specify Consumer	Goods		

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2 Joyce L Oslacky		Case number (if known)	23-20213	
Credit One Bank	Last 4 digits of account number	0711		\$1,894.00
Nonpriority Creditor's Name 6801 S. Cimarron Road Las Vegas, NV 89113	When was the debt incurred?	Debt last incurred	in 8/2022	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
Yes	Other. Specify Consumer	Goods		
Credit One Bank	Last 4 digits of account number	8660		\$1,001.00
Nonpriority Creditor's Name 6801 S. Cimarron Road Las Vegas, NV 89113	When was the debt incurred?	Debt last incurred	in 8/2022	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
■ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
Yes	Other. Specify Consumer	Goods		
Discover Card	Last 4 digits of account number	6037		\$5,088.00
Nonpriority Creditor's Name P.O. Box 15316 Wilmington DE 10850	When was the debt incurred?	Debt last incurred	in	
Wilmington, DE 19850  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.	,			
■ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt	Obligations arising out of a sepa	aration agreement or divorce	that you did not	
Is the claim subject to offset?	report as priority claims			
No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
☐ Yes	Other Specify Consumer	Goods		

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Debt Debt	or 1 Michael J. Oslacky Or 2 Joyce L Oslacky		Case number (if known) 23-20213	
4.1 4	Feb Destiny	Last 4 digits of account number	0159	\$579.00
	Nonpriority Creditor's Name P.O. Box 4499 Beaverton, OR 97076 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred?  As of the date you file, the claim	Debt last incurred in 10/2022 is: Check all that apply	
Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt Is the claim subject to offset?  No  Yes	Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Consumer			
4.1	First Savings Bank-Blaze Credit Card Nonpriority Creditor's Name P.O. Box 5065 Sioux Falls, SD 57117 Number Street City State Zip Code	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim	Debt last incurred in 10/2022 is: Check all that apply	\$627.00
	Who incurred the debt? Check one.  ■ Debtor 1 only  □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecure ☐ Student loans ☐ Obligations arising out of a separations.	d claim: aration agreement or divorce that you did not	
	Is the claim subject to offset?  ■ No □ Yes	report as priority claims  Debts to pension or profit-sharin  Other. Specify  Consumer	ng plans, and other similar debts	
4.1	First Savings Credit Card  Nonpriority Creditor's Name 500 E. 60th Street N.	Last 4 digits of account number When was the debt incurred?	Debt last incurred in 2022	\$853.00
	Sioux Falls, SD 57104  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecure ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	aration agreement or divorce that you did not	
	☐ Yes	Other Specify Consumer	Goods	

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	2 Joyce L Oslacky		Case number (if known)	23-20213	
4.1	FNB Omaha	Last 4 digits of account number	4846		\$1,047.00
7	Nonpriority Creditor's Name P.O. Box 3412	When was the debt incurred?	Debt last incurred i	n 8/2022	<b>41,011100</b>
	Omaha, NE 68197  Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply		
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Oneck all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a sepa	ration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharin	•	ebts	
	Yes	Other. Specify Consumer	Goods		
4.1	Fortiva MC/TBOM	Last 4 digits of account number	9864		\$1,346.00
	Nonpriority Creditor's Name		Dobt lost inquired i	n 7/2022	
	5 Concourse Parkway Suite 400	when was the debt incurred?	Debt last incurred i	11 //2022	
	Atlanta, GA 30328	_			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:		
	At least one of the debtors and another	Student loans	d Ciaiiii.		
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	ration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims	iration agreement or divorce	that you did not	
	No	Debts to pension or profit-sharing			
	Yes	Other. Specify Consumer	Goods		
4.1	Friet Services Condit Cond		4200		<b>#052.00</b>
9	Frist Savings Credit Card  Nonpriority Creditor's Name	Last 4 digits of account number	4200		\$853.00
	500 E. 60th Street N Sioux Falls, SD 57104	When was the debt incurred?	Debt last incurred i	n 8/2022	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed	Lateta		
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	d claim:		
	Check if this claim is for a community debt	☐ Obligations arising out of a sepa	ration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar de	hte	
	■ No	·	•	ะมเอ	
	Yes	Other. Specify Consumer	G000S		

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Debtor Debtor	r 1 Michael J. Oslacky T 2 Joyce L Oslacky		Case number (if known)	23-20213	
4.2 0	Heritage Valley Sewickley	Last 4 digits of account number	6402	\$45.00	
	Nonpriority Creditor's Name c/o Credit Collections Co. 16 Distributor Drive Suite 1 Morgantown, WV 26501	When was the debt incurred?	Debt last incurred in	2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce th	at you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debt	S	
	Yes	Other. Specify Medical Se	rvices		
4.2	Heritage Valley Sewickley  Nonpriority Creditor's Name	Last 4 digits of account number	6401	\$172.00	
	c/o Credit Collections Co. 16 Distributor Drive Suite 1	When was the debt incurred?	Debt last incurred in	2019	
	Morgantown, WV 26501  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	at you did not		
	■ No	Debts to pension or profit-sharin	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Medical Se	rvices		
4.2	JPMCB-Card Services  Nonpriority Creditor's Name	Last 4 digits of account number	3184	\$830.00	
	301 N. Walnut Street Floor 09 Wilmington, DE 19801	When was the debt incurred?	Debt last incurred in	10/2022	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce th	at you did not	
	■ No	$\square$ Debts to pension or profit-sharin	g plans, and other similar debt	S	
	Yes	■ Other, Specify Consumer	Goods		

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Debtor 1 Michael J. Oslacky

Debt	or 2 Joyce L Oslacky		Case number (if known)	23-20213	
4.2	Klarna	Last 4 digits of account number			\$704.09
3	Nonpriority Creditor's Name c/o True Accord 16011 College Blvd. Suite 130 Lenexa, KS 66219	When was the debt incurred?	2021		<u> </u>
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	Yes	Other. Specify Installment	Loan		
4.2 4	Kohl's/Capital One	Last 4 digits of account number	3225		\$857.00
	Nonpriority Creditor's Name P.O. Box 3115 Milwaukee, WI 53201	When was the debt incurred?	Debt last incurred i	in 2021	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Consumer	Goods		
4.2 5	Kohl's/Capital One	Last 4 digits of account number	2457		\$577.00
	Nonpriority Creditor's Name P.O. Box 3115 Milwaukee, WI 53201	When was the debt incurred?	Debt last incurred i	in 8/2022	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul>	ration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims			
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify Consumer Goods			

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	2 Joyce L Oslacky		Case number (if known)	23-20213			
4.2	LVNV Funding		8513		\$0.42.00		
6	LVNV Funding  Nonpriority Creditor's Name	Last 4 digits of account number	0313		\$942.00		
	55 Beattie Place	When was the debt incurred?	Debt last incurred in	n 6/2022			
	Greenville, SC 29601  Number Street City State Zip Code	As of the data you file, the claim	in Charle all that apply				
	Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only						
	•	☐ Disputed  Type of NONPRIORITY unsecure	d claim:				
	At least one of the debtors and another	Student loans	a olami.				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	ration agreement or divorce	that you did not			
	Is the claim subject to offset?	report as priority claims	illation agreement of divorce	inat you did not			
	■ No	Debts to pension or profit-sharing	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Consumer	Goods				
4.2	LVNV Funding		1873		\$1,979.00		
7	Nonpriority Creditor's Name	Last 4 digits of account number			φ1,979.00		
	55 Beattie Place When was the debt incurred?		Debt last incurred in	n 6/2022			
	Greenville, SC 29601						
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	Пол					
		☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d alaim.				
	At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt		that you did not				
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	■ No	☐ Debts to pension or profit-sharir					
	☐ Yes	Other Specify Consumer	er. Specify Consumer Goods				
4.2							
8	Mariner Finance	Last 4 digits of account number	5714		\$2,293.00		
	Nonpriority Creditor's Name 5802 E. Virginia Beach Blvd. Suite 121	When was the debt incurred?	12/27/2021				
	Norfolk, VA 23502						
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another		Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community	Student loans					
	debt	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not			
	Is the claim subject to offset?	Debts to pension or profit-sharir	a plans, and other similar dol	hte			
	■ No			0.0			
	Yes	Other. Specify Installment	ACCOUNT				

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Debtor 1 Michael J. Oslacky

Debte	Joyce L Oslacky		Case number (if known)	23-20213					
4.2									
9	Mission Lane Tab Bank	Last 4 digits of account number	8627		\$2,100.00				
	Nonpriority Creditor's Name 101 2nd Street Suite 350	When was the debt incurred?	Debt last incurred in						
	San Francisco, CA 94105								
	Number Street City State Zip Code	As of the date you file, the claim							
	Who incurred the debt? Check one.								
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce t	hat you did not					
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar deb	nts	\$1,769.00 22 did not \$2,396.00				
		·	•						
	☐ Yes	Other. Specify Consumer	Goods						
4.3	Ollo/Ally	Last 4 digits of account number	6717		\$1,769.00				
	Nonpriority Creditor's Name 1511 Friendship Road	When was the debt incurred?	Debt last incurred in	n 8/2022					
	Jefferson City, MO 65109  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply						
	Who incurred the debt? Check one.	,							
	☐ Debtor 1 only ☐ Contingent ☐ Debtor 2 only ☐ Unliquidated								
	′	_ `							
	☐ Debtor 1 and Debtor 2 only	Disputed	d claim:						
	_	At least one of the debtors and another  Type of NONPRIORITY unsecured claim:  Student loans							
	☐ Check if this claim is for a community debt	_							
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims							
	No	Debts to pension or profit-sharing	g plans, and other similar deb	ots					
	Yes	Other. Specify Consumer	Goods						
4.3	Ollo/Ally		2020		¢2 206 00				
1	Ollo/Ally Nonpriority Creditor's Name	Last 4 digits of account number			\$2,390.00				
	1511 Friendship Road Jefferson City, MO 65109	When was the debt incurred?	Debt last incurred in	n 8/2022					
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply						
	Who incurred the debt? Check one.								
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	Constant leave							
	☐ At least one of the debtors and another								
	☐ Check if this claim is for a community								
	debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not							
	Is the claim subject to offset?	report as priority claims							
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar deb	ots					
	Yes	Other, Specify     Consumer	Goods						

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Joyce L Oslacky		Case number (if known)	23-20213	
St. Clair Hospital	Last 4 digits of account number			\$3,200
Nonpriority Creditor's Name	When was the debt incurred?	2019		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
☐ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	e that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar d	ebts	
Yes	■ Other. Specify Medical Se	rvices		
Synchrony Bank/Care Credit	Last 4 digits of account number	1111		\$1,699
Nonpriority Creditor's Name P.O. Box 965036	When was the debt incurred?	Debt last incurred	in 8/2022	
Orlando, FL 32896  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
☐ Debtor 1 only	☐ Contingent			
■ Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	e that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar d	ebts	
Yes	Other. Specify Consumer	Goods		
Synchrony Bank/Care Credit	Last 4 digits of account number	8368		\$351
Nonpriority Creditor's Name P.O. Box 965036	When was the debt incurred?	Debt last incurred	in 10/2022	,,,,
Orlando, FL 32896		: Ol		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	Student loans			
debt	Obligations arising out of a sepa	aration agreement or divorce	that you did not	
Is the claim subject to offset?	report as priority claims			
No	Debts to pension or profit-sharing		ebts	
□ Yes	Other Specify Consumer	Goods		

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Joyce L Oslacky		Case number (if known)	23-20213				
Synchrony Bank/Lowes	Last 4 digits of account number	8905		\$958.00			
Nonpriority Creditor's Name 4125 Windward Plaza Alpharetta, GA 30005	When was the debt incurred?	Debt last incurred in 8/2022					
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
Debtor 1 only	☐ Contingent						
☐ Debtor 2 only	☐ Unliquidated						
Debtor 1 and Debtor 2 only	☐ Disputed						
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
☐ Check if this claim is for a community	☐ Student loans						
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims						
No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts				
Yes	Other. Specify Consumer	Goods					
Synchrony Bank/Sam's Club	Last 4 digits of account number	3345		\$950.00			
Nonpriority Creditor's Name 4125 Windward Plaza Alpharetta. GA 30005	When was the debt incurred?	Debt last incurred	in 8/2022				
lumber Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
Debtor 1 and Debtor 2 only	☐ Disputed						
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
☐ Check if this claim is for a community	☐ Student loans						
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not				
No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts				
Yes	Other. Specify Consumer	Goods					
TBOM/Aspire	Last 4 digits of account number	7628		\$1,393.00			
Nonpriority Creditor's Name 5 Concourse Parkway Atlanta. GA 30328	When was the debt incurred?	Debt last incurred	in 8/2022				
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
Debtor 1 and Debtor 2 only	☐ Disputed						
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
☐ Check if this claim is for a community	☐ Student loans						
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not				
■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts				
☐ Yes	Other Specify Consumer	Goods					

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Debtor 1 Michael J. Oslacky

Debto	Joyce L Oslacky		Case number (if known)	23-20213							
4.3	TD Bank/Target Credit		9049		\$406.00						
8	TD Bank/Target Credit  Nonpriority Creditor's Name	Last 4 digits of account number	8048	-	\$406.00						
	70000 Target Parkway N Mail Stop NCD-0450	When was the debt incurred?	Debt last incurred i	n 10/2022							
	Brooklyn Park, MN 55445  Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply								
	Who incurred the debt? Check one.	•									
	Debtor 1 only	☐ Contingent									
	■ Debtor 2 only										
	Debtor 1 and Debtor 2 only	☐ Disputed									
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:								
	☐ Check if this claim is for a community	☐ Student loans									
	debt Is the claim subject to offset?										
	■ No	bts									
	Yes	Other. Specify Consumer	Goods								
4.3	The Sleep Wellness Center	Last 4 digits of account number			\$312.50						
9	Nonpriority Creditor's Name  993 Brodhead Road	When was the debt incurred?	2020		<u> </u>						
	Suite 200 Moon Twp., PA 15108-2305  Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i									
	Debtor 1 only	☐ Contingent									
	Debtor 2 only	☐ Unliquidated									
	Debtor 1 and Debtor 2 only	_ '									
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured									
	☐ Check if this claim is for a community	☐ Student loans									
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims									
	No	Debts to pension or profit-sharin	g plans, and other similar de	bts							
	Yes	Other. Specify Medical Ser	rvices								
4.4	Upgrade	Last 4 digits of account number	8965		\$2,297.00						
	Nonpriority Creditor's Name 275 Battery Street 22nd Floor	When was the debt incurred?	2021								
	San Francisco, CA 94111  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply								
	Debtor 1 only	☐ Contingent									
	■ Debtor 2 only	☐ Unliquidated									
	Debtor 1 and Debtor 2 only	☐ Disputed									
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured									
	☐ Check if this claim is for a community	☐ Student loans									
	debt	Obligations arising out of a sepa									
	Is the claim subject to offset?	report as priority claims									
	■ No	Debts to pension or profit-sharin		bts							
	☐ Yes	■ Other. Specify Line of Cre	dit								

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Debtor 1 Michael J. Oslacky

Debte	Joyce L Oslacky		Case number (if known)	23-20213	
4.4			1010		40.040.00
1	Upgrade	Last 4 digits of account number	4816		\$9,942.00
	Nonpriority Creditor's Name 275 Battery Street	When was the debt incurred?	8/13/2021		
	22nd Floor				
	San Francisco, CA 94111				
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.	<u>_</u>			
	Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	that you did not			
	■ No	ots			
	□Yes	■ Other Specify Line of Cre	dit		
	Li res	Other. Specify	uit		
4.4	11-1:54		xx83		£20.00
2	Uplift Nonpriority Creditor's Name	Last 4 digits of account number	XXOS		\$38.00
	440 N. Wolfe Road Sunnyvale, CA 94085	When was the debt incurred?	2/24/2022		
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.		,		
	Debtor 1 only				
	■ Debtor 2 only				
	Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed			
		Type of NONPRIORITY unsecured	d claim:		
	☐ At least one of the debtors and another	☐ Student loans	. Julii		
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	ration agreement or diverse	that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce	tnat you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar del	bts	
	Yes	■ Other. Specify Installment	Account		
4.4 3	Upstart	Last 4 digits of account number	9980		\$3,174.00
	Nonpriority Creditor's Name 2950 South Delaware Street San Mateo, CA 94403	When was the debt incurred?	10/12/2021		
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.	<del>-</del>			
	Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	<u> </u>	Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	ration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims	adion agreement or divolce	mat you did Hot	
	■ No	Debts to pension or profit-sharing	g plans, and other similar del	bts	
	☐ Yes	■ Other Specify Installment	Account		
	30	- Other specify			

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Upstart	Last 4 digits of account number	xx41		\$3
Nonpriority Creditor's Name	_			
2950 South Delaware Street	When was the debt incurred?	12/22/2020		
San Mateo, CA 94403 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce to	hat you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar deb	ots	

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					_
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$	0.00
	6h.	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ ———	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	70,385.59
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	70,385.59

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Fill in this inform	Fill in this information to identify your case:					
Debtor 1	Michael J. Oslack	у				
	First Name	Middle Name	Last Name			
Debtor 2	Joyce L Oslacky					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA			
Case number	23-20213					
(if known)					☐ Check if this is an	
					amended filing	

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the coer, Street, City, State and ZIP Coo	ontract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.5	· ·				
	Name				_
	Number	Street			_
	City		State	ZIP Code	

Fill in thi	s information to identify your	case:			
Debtor 1	Michael J. Oslaci	ку			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fil	Joyce L Oslacky First Name	Middle Name	Last Name		
	6,				
United Sta	ates Bankruptcy Court for the:	WESTERN DISTRIC	T OF PENNSYLVANIA		
Case num	nber <b>23-20213</b>				
(if known)				☐ Check if this is ar amended filing	1
Officia	al Form 106H				
Sched	dule H: Your Cod	ebtors		1:	2/15
eople are	e filing together, both are equ	ally responsible for su boxes on the left. Atta	pplying correct information ch the Additional Page to t	omplete and accurate as possible. If two marringly in the Additional his page. On the top of any Additional Pages, which pages is page. On the top of any Additional Pages, which was a support to the top of any Additional Pages.	Page,
1. Do	you have any codebtors? (If	you are filing a joint case	e, do not list either spouse as	a codebtor.	
■ No	)				
☐ Ye	S				
0 14/5	thin the leat Overen have ver	. 15		/Occasion with a superior of the state of the suite size in all all	
	na, California, Idaho, Louisiana			(Community property states and territories include ton, and Wisconsin.)	3
	,,,	,		,,	
■ No	. Go to line 3.				
☐ Ye	s. Did your spouse, former spo	use, or legal equivalent l	ive with you at the time?		
in lin Form	e 2 again as a codebtor only	f that person is a guara	antor or cosigner. Make sui	your spouse is filing with you. List the person re you have listed the creditor on Schedule D ( i). Use Schedule D, Schedule E/F, or Schedule	Official
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the Check all schedules that apply:	debt
3.1				☐ Schedule D. line	
3.1	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street				
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
5.2	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street				
	City	State	ZIP Code		

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Fill i	in this information to identify your	case:				1				
	otor 1 Michael J. (									
	otor 2 Joyce L Os	lacky								
Unit	ted States Bankruptcy Court for the	e: WESTERN DISTRICT	Γ OF PENNSYLVA	NIA						
Cas (If kn	ee number 23-20213 own)		-				led filing nent sho	wing postpetition e following date:		
Of	fficial Form 106l					MM / DD/		e following date.		
	chedule I: Your Inc	ome				IVIIVI / DD/			12/15	
supp spot	as complete and accurate as pos olying correct information. If you use. If you are separated and yo ch a separate sheet to this form.  Describe Employment	are married and not filing ware spouse is not filing ware on the top of any additi	ng jointly, and yo ith you, do not inc	ur spouse clude infor	is liv mati	ing with you, inc on about your sp	lude inf ouse. If	ormation about more space is	your needed,	
1.	Fill in your employment information.		Debtor 1			Debtor	2 or no	n-filing spouse		
	If you have more than one job,	Employment status	☐ Employed			■ Emp	loyed			
	attach a separate page with information about additional employers.	Employment status	■ Not employed			□ Not	☐ Not employed			
	Include part-time, seasonal, or	Occupation				Manag	jer			
	self-employed work.	Employer's name				Apple	Americ	an Group		
	Occupation may include student or homemaker, if it applies.	Employer's address					Brodhea a, PA 1	ad Road I5061		
		How long employed t	here?				7 years	5		
spou	mate monthly income as of the case unless you are separated.  u or your non-filing spouse have m	date you file this form. If	, 3	·	Í	, ,	·	•	Ü	
more	e space, attach a separate sheet to	this form.				For Debtor 1		Debtor 2 or	,	
								-filing spouse		
2.	List monthly gross wages, sale deductions). If not paid monthly,			2.	\$	0.00	\$	5,845.39		
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	0.00		
4.	Calculate gross Income. Add I	ine 2 + line 3.		4.	\$	0.00	\$	5,845.39		

Official Form 106I Schedule I: Your Income page 1

	tor 1 tor 2	Michael J. Oslacky Joyce L Oslacky		C	Case nur	mber ( <i>if ki</i>	nown)	23	-20213		
	Cop	y line 4 here	4.		For De	ebtor 1	0.00		or Debtor on-filing s		
E	l int										_
5.		all payroll deductions:	<b>-</b> -		Φ.			Φ.		070 05	
	5a.	Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans	5a.		\$		0.00	\$ \$	1	,278.95	_
	5b. 5c.	Voluntary contributions for retirement plans	5b. 5c.		\$		0.00	\$ \$		0.00	_
	5d.	Required repayments of retirement fund loans	5d.		\$		0.00 0.00	\$ \$		234.85 157.91	_
	5e.	Insurance	5e.		\$		0.00	\$		698.51	_
	5f.	Domestic support obligations	5f.		\$		0.00	\$		0.00	_
	5g.	Union dues	5g.		\$		0.00	\$		0.00	_
	5h.	Other deductions. Specify: Family Fund	5h.	.+	\$	(	0.00	+ \$		1.08	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	:	\$	(	0.00	\$	2	,371.30	<u> </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	\$	(	0.00	\$	3	,474.09	_
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	90		¢.	_		¢.		0.00	
	8b.	monthly net income. Interest and dividends	8a. 8b.		\$ \$		0.00	\$ \$		0.00	_
	8c. 8d.	Family support payments that you, a non-filing spouse, or a depende regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation			\$ \$	(	0.00	\$ \$		0.00	_
	8e.	Social Security	8e.		\$		0.00	\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$	(	0.00	\$		0.00	_
	8g.	Pension or retirement income	8g.	-	\$		0.00	\$		0.00	
	8h.	Other monthly income. Specify:	8h.	.+	\$		0.00	+ 5		0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	(	0.00	\$		0.0	0
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$		0.00	+ \$	:	3,474.09	= \$	3,474.09
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_					,		,
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedulate contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are notify:	ur depe					•	n Schedul	e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certies								\$	3,474.09
46	_		0								ly income
13.	Do y	ou expect an increase or decrease within the year after you file this for No. Yes. Explain:	m?								

Official Form 106l Schedule I: Your Income page 2

EIII	in this inform	nation to identify yo	our case:							
Deb	tor 1	Michael J. Oslacky				Check if this is:  An amended filing				
Deb		Joyce L Osla	acky				A supple	ement show	wing postpetition cha	pter
(Spc	ouse, if filing)						13 expe	nses as of	the following date:	
Unite	United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA						MM / DI	) / YYYY		
Case	e number	23-20213								
(If kr	nown)									
Of	fficial F	orm 106J				ı				
			 Evner	NCAC						40/4
		e J: Your		If two married people are	e filina toaether, bo	oth are eq	ually resi	onsible fo	or supplying correc	12/1: t
info	rmation. If		eded, atta	ch another sheet to this f						
Part	t 1: Des	cribe Your House	ehold							
1.	ls this a jo									
	□ No. Go									
	Yes. Do	oes Debtor 2 live	in a separa	ate household?						
	_		-1 (1) - 0(1) -1	-15 40010 5	f O		la tara O			
	Ц	Yes. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	tor Separate House	enola of De	eptor 2.			
2.	Do you ha	ve dependents?	■ No							
	Do not list Debtor 2.	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Depo age	endent's	Does dependent live with you?	
						-	90		□ No	
	Do not stat dependent								☐ Yes	
									□ No	
									☐ Yes	
									□ No □ Yes	
									☐ Yes	
									☐ Yes	
3.		xpenses include of people other t	han 🔳	No						
		nd your depende		Yes						
Part	t 2: Esti	mate Your Ongoi	ina Monthl	v Expenses						
exp	imate your	expenses as of yet a date after the	our bankrı	uptcy filing date unless you y is filed. If this is a supp						
				government assistance if						
	value of su ficial Form		d have inc	luded it on Schedule I: Y	our Income			Your exp	enses	
(0	iolai i oilii	1001.)								
4.		or home owners and any rent for th		<b>ses for your residence.</b> Ir r lot.	nclude first mortgage	e 4.	\$		0.00	
	If not inclu	uded in line 4:								
	4a. Rea	l estate taxes				4a.	\$		0.00	
		perty, homeowner's	-			4b.	·		0.00	
		ne maintenance, re neowner's associat	•			4c. 4d.			100.00	
5.				our residence, such as hor	me equity loans	4u. 5.			0.00	

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	otor 1 Michael J. Oslacky Joyce L Oslacky	Case numb	per (if known)	23-20213
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	255.00
	6b. Water, sewer, garbage collection	6b.	\$	100.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	237.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	600.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	190.00
10.	Personal care products and services	10.	\$	50.00
11.	Medical and dental expenses	11.	\$	150.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.	10	Φ.	500.00
40	Do not include car payments.	12.	· .	
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	250.00
	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.  Do not include incurance deducted from your pay or included in lines 4 or 20			
	Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance	15a.	\$	148.00
	15b. Health insurance	15a. 15b.	·	0.00
	15c. Vehicle insurance	15c.	*	145.00
	15d. Other insurance. Specify:	15d.	·	0.00
16	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	Specify:	16.	\$	0.00
17.	Installment or lease payments: 17a. Car payments for Vehicle 1	17a.	¢	0.00
	17b. Car payments for Vehicle 2	17a. 17b.		0.00 0.00
		17b. 17c.	•	
	17c. Other. Specify:  17d. Other. Specify:	17d.	·	0.00
10	Your payments of alimony, maintenance, and support that you did not report		Ψ	0.00
10.	deducted from your pay on line 5, Schedule I, Your Income (Official Form 10)		\$	0.00
19.		o.,.	\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on S	Schedule I: Yo	ur Income.	
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00
21.	Other: Specify:	21.	+\$	0.00
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	2,725.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J	-2	\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,725.00
00	Coloulate value monthly not income	l		·
23.	Calculate your monthly net income.	220	Φ	0.474.00
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.		3,474.09
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	2,725.00
	23c. Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	749.09
24.	Do you expect an increase or decrease in your expenses within the year after For example, do you expect to finish paying for your car loan within the year or do you expect modification to the terms of your mortgage?  ■ No. □ Yes. Explain here:			ease or decrease because of a
	Explain here.			

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Fill in this infor	mation to identify your	case:					
Debtor 1	Michael J. Oslack	τ <b>V</b>					
	First Name	Middle Name	Last Name				
Debtor 2	Joyce L Oslacky						
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA				
Case number	23-20213						
(if known)				☐ Chec	k if this is an		
				amen	nded filing		
If two married po	eople are filing togethe	r, both are equally respo					
years, or both. 1	8 U.S.C. §§ 152, 1341, 1	519, and 3571.			·		
Sign	n Below						
Did you pa	y or agree to pay some	one who is NOT an atto	rney to help you fill out ba	ankruptcy forms?			
■ No							
☐ Yes. N	Name of person	•			tach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119)		
				,	,		

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and

that they are true and correct.

X /s/ Michael J. Oslacky

Michael J. Oslacky

Signature of Debtor 1

Date February 7, 2023

X /s/ Joyce L Oslacky

Joyce L Oslacky Signature of Debtor 2

Date February 7, 2023

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Fill i	n this info	rmation to identify you	r case:						
Debt	or 1	Michael J. Oslac	ky						
		First Name	Middle Name	Last Name					
Debt (Spous	or 2 se if, filing)	Joyce L Oslacky First Name	Middle Name	Last Name					
		sankruptcy Court for the:	WESTERN DISTRICT C	NE DENNSVI VANIA					
Office	eu States D	cankruptcy Court for the.	WESTERN DISTRICT C	FEMINSTEVANIA					
Case (if know		23-20213			_	heck if this is an mended filing			
Sta Be as	temen	and accurate as possi	ble. If two married people		Sankruptcy equally responsible for sup y additional pages, write you				
numb Part		wn). Answer every ques	stion. Irital Status and Where Yo	u Lived Refore					
		ur current marital statu		u Liveu Belore					
 	■ Marrie								
2. I	During the	ng the last 3 years, have you lived anywhere other than where you live now?							
i	<ul> <li>■ No</li> <li>Yes. List all of the places you lived in the last 3 years. Do not include where you live now.</li> </ul>								
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there			
					nity property state or territory ico, Texas, Washington and W				
		Make sure you fill out <i>Scl</i>	nedule H: Your Codebtors (C	Official Form 106H).					
F	Did you ha	ive any income from en	nployment or from operati u received from all jobs and	ng a business during this yeall businesses, including partive together, list it only once un		ndar years?			
 	□ No ■ Yes. F	fill in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
the date was filed for benieve to			☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$2,088.76			
			☐ Operating a business		☐ Operating a business				

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Michael J. Oslacky Debtor 1 23-20213 Case number (if known) Debtor 2 Joyce L Oslacky Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions Check all that apply. (before deductions and Check all that apply. exclusions) and exclusions) For last calendar year: \$0.00 \$69,921.72 ☐ Wages, commissions, ■ Wages, commissions, (January 1 to December 31, 2022) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$0.00 \$56,261.00 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2021) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. **Debtor 1** Debtor 2 **Gross income from** Sources of income **Gross income** Sources of income Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) For the calendar year before that: 401(k) distribution Unemployment \$2,490.00 \$16,298.00 (January 1 to December 31, 2021) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose," During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575\* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$7,575\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... paid still owe

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Debtor Debtor	•				Case number (if	known)	23-20213	
<i>Ins</i> of v a b	thin 1 year before you filed for bankrupt iders include your relatives; any general publich you are an officer, director, person in usiness you operate as a sole proprietor. In nony.	artners n contr	s; relatives of any ge ol, or owner of 20%	neral partners; par or more of their vo	tnerships of wh	ich you and an	u are a genera ly managing a	al partner; corporations gent, including one fo
■	No Yes. List all payments to an insider.							
In	sider's Name and Address	Dat	es of payment	Total amount paid		•	Reason for	this payment
ins	thin 1 year before you filed for bankrupt ider? Iude payments on debts guaranteed or cos	-		yments or transfe	er any property	on ac	count of a de	ebt that benefited an
	No							
□ In	Yes. List all payments to an insider sider's Name and Address	Dat	es of payment	Total amount			Reason for	this payment
Part 4:	Identify Legal Actions, Repossessio			paid	Still C	owe	include cred	itor's name
	No Yes. Fill in the details.  ase title ase number	Nat	cure of the case	Court or agen	су		Status of th	e case
10. <b>Wi</b>	thin 1 year before you filed for bankrupt eck all that apply and fill in the details belo No. Go to line 11.		as any of your prop	perty repossessed	d, foreclosed, ç	garnis	hed, attached	l, seized, or levied?
	Yes. Fill in the information below.	Day	aniha tha Duananti			Data		Value of the
Ci	editor Name and Address		scribe the Property plain what happene			Date		Value of the property
acc	thin 90 days before you filed for bankru counts or refuse to make a payment bed No	ptcy, o	did any creditor, in		financial insti	tution	, set off any a	mounts from your
□ Cı	Yes. Fill in the details. reditor Name and Address	Des	scribe the action th	e creditor took			action was	Amount
	thin 1 year before you filed for bankrupt urt-appointed receiver, a custodian, or a			perty in the posse		taken signee		efit of creditors, a
-	No							
	Yes							
Part 5:	List Certain Gifts and Contributions							
•	thin 2 years before you filed for bankrup No	otcy, d	lid you give any gif	ts with a total val	ue of more tha	n \$600	per person?	?
□ Gi	Yes. Fill in the details for each gift.  fts with a total value of more than \$600		Describe the gifts	S			you gave	Value
Pe	er person erson to Whom You Gave the Gift and ddress:					the gi	fts	

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	otor 1 Michael J. Oslacky Joyce L Oslacky		Case number (if known)	23-20213	
14.	Within 2 years before you filed for bankruptcy  ■ No  □ Yes. Fill in the details for each gift or contrib		ns with a total value	of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed		s you ributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankruptcy or gambling?	or since you filed for bankruptcy, did	you lose anything b	ecause of the	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	how the loss occurred Inclu	cribe any insurance coverage for the I de the amount that insurance has paid. I rance claims on line 33 of Schedule A/B:	List pending loss	of your	Value of property lost
Par	t 7: List Certain Payments or Transfers		. ,		
16.	Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepared include any attorneys, bankruptcy petition prepared in the No in the Metails.	aring a bankruptcy petition?			rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred		payment ansfer was e	Amount of payment
	Law Offices of Rodney Shepherd 2403 Sidney Street Suite 208 Pittsburgh, PA 15203 rodsheph@cs.com	Attorney Fees	1/30	/2023	\$1,200.00
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors. Do not include any payment or transfer that you	or to make payments to your creditor		fer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address	Description and value of any prop transferred		payment ansfer was e	Amount of payment
	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your but include both outright transfers and transfers mad include gifts and transfers that you have already  No  Yes. Fill in the details.	siness or financial affairs? le as security (such as the granting of a s		-	
	Person Who Received Transfer Address	Description and value of property transferred	Describe any pro payments receiv paid in exchange	ed or debts	Date transfer was made
	Person's relationship to you				

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23-20213 Debtor 2 Joyce L Oslacky Case number (if known) Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Date account was Last balance Type of account or Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, Address (Number, Street, City, State and ZIP Code) have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Describe the contents Name of Storage Facility Who else has or had access Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No П Yes. Fill in the details.

#### Part 10: Give Details About Environmental Information

Address (Number, Street, City, State and ZIP Code)

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

Describe the property

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Where is the property?

(Number, Street, City, State and ZIP

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Value

**Owner's Name** 

Debtor 1

Michael J. Oslacky

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Debtor 1 Michael J. Oslacky
Debtor 2 Joyce L Oslacky

Case number (if known) 23-20213

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?									
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any	release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or adminis	strative proceeding under any envi	ronmental law? Include settlements a	nd orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	11: Give Details About Your Business or Con	nections to Any Business							
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have an	y of the following connections to any	business?					
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation								
	■ No. None of the above applies. Go to Part 12.								
	Yes. Check all that apply above and fill in the details below for each business.								
		escribe the nature of the business	Employer Identification number						
	Address (Number, Street, City, State and ZIP Code)	me of accountant or bookkeeper	Do not include Social Security n	lumber or IIIN.					
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Inclinstitutions, creditors, or other parties.									
	■ No □ Yes. Fill in the details below.								
	Name Da Address (Number, Street, City, State and ZIP Code)	te Issued							

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Debtor 1 Debtor 2	Michael J. Oslacky Joyce L Oslacky		Case number (if known)	23-20213
Part 12:	Sign Below			
are true a with a bai	nd correct. I understand that making	g a false statement,	nd any attachments, and I declare under pena concealing property, or obtaining money or risonment for up to 20 years, or both.	
/s/ Mich	ael J. Oslacky	/s/ Joy	yce L Oslacky	
Michael	J. Oslacky	Joyce	L Oslacky	
Signatur	e of Debtor 1	Signat	ure of Debtor 2	
Date F	ebruary 7, 2023	Date	February 7, 2023	
Did you a	ttach additional pages to Your State	ement of Financial A	Affairs for Individuals Filing for Bankruptcy (	Official Form 107)?
■ No				
☐ Yes				
Did you p	ay or agree to pay someone who is	not an attorney to h	nelp you fill out bankruptcy forms?	
■ No				
☐ Yes. Na	ame of Person Attach the Ban	kruptcy Petition Prep	parer's Notice, Declaration, and Signature (Offici	al Form 119).

Fill in this inforr	Fill in this information to identify your case:				
Debtor 1	Michael J. Oslacky				
Debtor 2 (Spouse, if filing)	Joyce L Oslacky				
United States E	Bankruptcy Court for the: Western District of Pennsylvania				
Case number (if known)	23-20213				

Check	Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:							
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

### Official Form 122C-1

## **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. ☐ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 5,845.39 0.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

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tor 1 tor 2	Michael J. Oslacky Joyce L Oslacky			Case number	er ( <i>if kn</i> ow	<sub>(n)</sub> 23-20213	3	
				Column A Debtor 1		Column B Debtor 2	or	
Inte	erest, dividends, and royalties			\$	0.0	\$	0.00	
	employment compensation			\$	0.0		0.00	
Do	not enter the amount if you contend that the amo	ount received was a bene	efit under	·		<u> </u>		
F	For you	\$ 0	0.00					
F	or your spouse		0.00					
not Unidisa pay doe	nsion or retirement income. Do not include any perit under the Social Security Act. Also, except a include any compensation, pension, pay, annuit ted States Government in connection with a disability, or death of a member of the uniformed set paid under chapter 61 of title 10, then include the sonot exceed the amount of retired pay to which etired under any provision of title 10 other than of	as stated in the next sentity, or allowance paid by the ability, combat-related injustrices. If you received are hat pay only to the extentity you would otherwise be	ence, do he ury or ny retired t that it	\$	0.0	<b>0</b> \$	0.00	
Ince Do rece don Unit	ome from all other sources not listed above. not include any benefits received under the Soc eived as a victim of a war crime, a crime against nestic terrorism; or compensation, pension, pay, ted States Government in connection with a disability, or death of a member of the uniformed serices on a separate page and put the total below	Specify the source and a cial Security Act; payment thumanity, or internationa annuity, or allowance pa ability, combat-related inju- pervices. If necessary, list of	ts al or aid by the ury or	-		_ •		
				\$	0.0	0 \$	0.00	
				\$	0.0	<b>o</b> \$	0.00	
	Total amounts from separate pages, if any			\$	0.0		0.00	
	culate your total average monthly income. Act column. Then add the total for Column A to the Determine How to Measure Your Deduction	e total for Column B.	\$	5,845.39	+ \$	0.00		5,845.39
-	py your total average monthly income from li	ne 11.					\$	5,845.39
_	culate the marital adjustment. Check one:							
_	You are not married. Fill in 0 below.							
_	You are married and your spouse is filing with							
	You are married and your spouse is not filing was Fill in the amount of the income listed in line 1 dependents, such as payment of the spouse's	1, Column B, that was NO						
	Below, specify the basis for excluding this incoadjustments on a separate page.	me and the amount of in	icome de	voted to eac	h purpo	se. If necessar	y, list addit	ional
	If this adjustment does not apply, enter 0 below	N.						
			_ \$					
			_ \$		_			
			_ +\$					
	Total		\$	0.0	00_	Copy here=>		0.
Yo	our current monthly income. Subtract line 13 to	from line 12.					\$	5,845.39
_	alaulata usun aumant mesudi kabusansa t							
	alculate your current monthly income for the	year. Follow these steps	5.				_	5,845.39
15	ia Copy line 14 here=>						- 5	J,J-10.0

Michael J. Oslacky

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Debtor 1 Debtor 2	Joyce L Oslacky		Case number (if known)	23-20213
	Multiply line 15a by 12 (the number of mont	hs in a year).		<b>x</b> 12
15	5b. The result is your current monthly income for	or the year for this part of the form		\$ 70,144.68
16. <b>Cal</b>	alculate the median family income that applies	s to you. Follow these steps:		
16a	a. Fill in the state in which you live.	PA		
16t	b. Fill in the number of people in your household	2		
	ic. Fill in the median family income for your state  To find a list of applicable median income amount instructions for this form. This list may also be bow do the lines compare?	ounts, go online using the link specifi		\$\$
17a	Ta. Line 15b is less than or equal to line 10 11 U.S.C. § 1325(b)(3). Go to Part 3.			
17b	b. Line 15b is more than line 16c. On the 1325(b)(3). Go to Part 3 and fill out 0 your current monthly income from line	Calculation of Your Disposable Inc		
Part 3:	Calculate Your Commitment Period Unde	r 11 U.S.C. § 1325(b)(4)		
18. <b>Co</b>	ppy your total average monthly income from li	ne 11 .		\$\$
con spo	educt the marital adjustment if it applies. If you need that calculating the commitment period undouse's income, copy the amount from line 13. If the marital adjustment does not apply, fill in	der 11 U.S.C. § 1325(b)(4) allows yo		our -\$0.00
19b	b. Subtract line 19a from line 18.			\$5,845.39
20. <b>Cal</b>	alculate your current monthly income for the y	rear. Follow these steps:		
20a	a. Copy line 19b			\$5,845.39
	Multiply by 12 (the number of months in a yea	r).		<b>x</b> 12
20b	b. The result is your current monthly income for t	he year for this part of the form		\$ 70,144.68
200	c. Copy the median family income for your state	and size of household from line 16c		\$\$
21.	. How do the lines compare?			
	Line 20b is less than line 20c. Unless oth period is 3 years. Go to Part 4.	erwise ordered by the court, on the	top of page 1 of this f	form, check box 3, The commitment
	☐ Line 20b is more than or equal to line 20c	c. Unless otherwise ordered by the c	court, on the top of pa	age 1 of this form, check box 4, The
	commitment period is 5 years. Go to Part	4.		
Part 4:			at and in any attachmo	ents is true and correct.
Ву	Sign Below signing here, under penalty of perjury I declare to	hat the information on this statemen		ents is true and correct.
By : <b>X /s</b> <b>M</b>	Sign Below signing here, under penalty of perjury I declare to Michael J. Oslacky Michael J. Oslacky	hat the information on this statemen  X /s/ Joyce Joyce L	L Oslacky Oslacky	ents is true and correct.
X /s M Si	Sign Below visigning here, under penalty of perjury I declare to	hat the information on this statemen  X /s/ Joyce Joyce L o	L Oslacky	ents is true and correct.

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Debtor 1 Debtor 2 Doyce L Oslacky

Ocase number (if known)

Case number (if known)

23-20213

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
<u>+</u> \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 23-20213-JAD Doc 27 Filed 02/07/23 Entered 02/07/23 13:04:26 Desc Main Document Page 51 of 52

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Western District of Pennsylvania

In re	Michael J. Oslacky Joyce L Oslacky		Case No.	23-20213		
		Debtor(s)	Chapter	13	_	
	DISCLOSURE OF COMPE	NSATION OF ATTOR	RNEY FOR DE	BTOR(S)		
(	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation of	ng of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to	)	
	For legal services, I have agreed to accept		\$	5,000.00		
	Prior to the filing of this statement I have received			1,200.00		
	Balance Due			3,800.00		
2. 5	<b>313.00</b> of the filing fee has been paid.					
3.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
<b>l.</b> 7	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
5.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are memb	pers and associates of my law fir	m.	
	☐ I have agreed to share the above-disclosed compensations of the agreement, together with a list of the national states.					
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
1	a. Analysis of the debtor's financial situation, and render. Preparation and filing of any petition, schedules, state. Representation of the debtor at the meeting of credited. [Other provisions as needed]  Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho	ement of affairs and plan which ors and confirmation hearing, ar reduce to market value; exe ons as needed; preparation	n may be required; and any adjourned hear emption planning;	ings thereof; preparation and filing of		
7. ]	By agreement with the debtor(s), the above-disclosed fer Representation of the debtors in any dis any other adversary proceeding.			es, relief from stay actions o	or	
		CERTIFICATION				
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	y agreement or arrangement for	payment to me for re	presentation of the debtor(s) in		
F	ebruary 7, 2023	/s/ Rodney D. She	epherd			
D	ate	Rodney D. Sheph Signature of Attorne				
		Law Offices of Ro				
		2403 Sidney Stre	et			
		Suite 208 Pittsburgh, PA 15	5203			
		412 471-9670				
		rodsheph@cs.co  Name of law firm	m			
		rame oj iaw jirm				

### United States Bankruptcy Court Western District of Pennsylvania

In re	Michael J. Oslacky Joyce L Oslacky		Case No.	23-20213	
		Debtor(s)	Chapter	13	
		IATRIX			

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date:	February 7, 2023	/s/ Michael J. Oslacky	
		Michael J. Oslacky	
		Signature of Debtor	
Date:	February 7, 2023	/s/ Joyce L Oslacky	
		Joyce L Oslacky	
		Signature of Debtor	